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UTILITY	Atty Doc. No. 51315 Total Page 28
PATENT APPLICATION	FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER
TRANSMITTAL	Sabine OEPEN
	Express Mail Label No.
Application Elements	Address To: Assistant Commissioner for Patents

Box Patent Application Washington, D.C. 20231

1. / X / Fee transmittal Form	
(Submit an original,	and a duplicate for fee processing)
2./ X /Specification	Total Pages /
(Preferred arrangeme	ent set for below)

Descriptive title of the Invention

Cross References to Related Application

Statement Regarding Fed. Sponsored R & D

Reference to Microfiche Appendix

Background of the Invention

Brief Summary of the Invention

Brief Description of the Drawings (if filed)

Detailed Description

Claim(s)

Abstract of the Disclosure

3./ / Drawing(s)(35 USC 113)(Figs.)

Total Sheets / /

4./ X /Oath or Declaration

Total Pages/4/

a /x / Newly executed (original or copy)

Signed statement attached deleting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b).

5. / / Incorporation by reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6./	1	Microfiche	Computer	Program	(Appendix)
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/7./ /Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

/ Computer Readable Copy a./

/ Paper Copy (Identical to computer copy) b/

/ Statement verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

8./ X / Assignment Papers (cover sheet & document(s)

9/ / 37 CFR 3.73(b)Statement / /Power of Attorney

10./ /English Translation Document (if applicable)

/ / Copies of IDS Citations 11./ /Information Disclosure

/Preliminary Amendment

13./ x/Return Receipt Postcard (MPEP 503)

Should be specifically itemized)
14./ /Small Entity / /Statement filed in prior application
Statements Status still proper and desired
15.// Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16./	/Other	 	 	
		 	 	 _

17. If a Continuing Application, check appropriate box and supply the requisite inf	formation:
/ /Continuation / /Divisional / / Continuation-in part (CIP)	of prior application No.
CORRESPONDENCE ADDRESS	

or / / Correspondence address below

Insert Customer No. or Attach bar code label here

Name:

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/ Customer Number or Bar code Label

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The filing fee has been calculated as shown below:

For:	Number Filed	Number Extra	SMALL/LARGE ENTITY	BASIC FEE \$355./\$710.	
				\$ <u>710.00</u>	
Total Claims:	<u>7</u> -20) = x	\$09./\$18. =		
Indep. Claims:	:	3 =	x \$40./\$80.	=	
[] Multiple Dependent Claim(s) presented:\$135./270 =					
[x] A check is	s enclosed :	for the fili	ng fee.	\$ <u>710.00</u>	
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- [X] A check for \$750.00 for the filing fee and assignment recordation.
- [X] The Commissioner is hereby authorized to charge any other fee required, including the issue fee, in connection with the filing and prosecution of this application, and to the extent necessary, applicant(s) hereby petition for extension(s) of time under 37 CFR 1.136, to be charged to our Deposit Account 11-0345.

Respectfully submitted,

KEIL & WEINKAUF

Herbert B. Keil Reg. No. 18,967

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